

HOUSE BILL 459: Chronic Care Coordination Act

This Bill Analysis reflects the contents of the bill as it was presented in committee.

2013-2014 General Assembly

Committee:Senate Appropriations/Base BudgetDate:June 11, 2013Introduced by:Reps. Dollar, Murry, Hollo, LambethPrepared by:Theresa MatulaAnalysis of:First EditionLegislative Analyst

SUMMARY: House Bill 459 requires the Divisions of Public Health and Medical Assistance, Department of Health and Human Services, and the State Health Plan for Teachers and State Employees Division, Department of State Treasurer, to collaborate to reduce the incidence of chronic disease and improve chronic care coordination.

[As introduced, this bill was identical to S606, as introduced by Sens. Hise, Barringer, which is currently in Senate Health Care.]

BILL ANALYSIS: House Bill 459 creates a new Part 4A, "Chronic Care Coordination," of Article 7 ("Chronic Disease") of Chapter 130A of the General Statutes governing public health. The bill requires the Divisions of Public Health and Medical Assistance, Department of Health and Human Services, and the division in the Department of the State Treasurer responsible for the State Health Plan for Teachers and State Employees, to collaborate to reduce the incidence of chronic disease and improve chronic care coordination. The Divisions shall do the following:

- Identify goals and benchmarks for the reduction of chronic disease.
- Develop wellness and prevention plans.
- Submit annual reports to the Senate Appropriations Committee on Health and Human Services, the House Appropriations Subcommittee on Health and Human Services, the Joint Legislative Oversight Committee on Health and Human Services, and the Fiscal Research Division. The reports shall include the following:
 - o The financial impact and magnitude of the chronic health conditions most likely to cause death and disability, including certain conditions listed in the bill.
 - An assessment of benefits derived from wellness and prevention programs and activities designed to coordinate chronic care.
 - A description of the level of coordination among the agencies charged with care coordination responsibilities.
 - Detailed action plans for care coordination of multiple chronic health conditions in the same patient.
 - A detailed budget identifying all costs associated with implementing the mandated action plans.

EFFECTIVE DATE: This act is effective when it becomes law.

Jan Paul, staff to the House Health Committee, contributed to this summary.

